Welcome by Kristi Plotner with each stakeholder introducing themselves along with their workgroup affiliation. A special thanks extended to MCHS for hosting the meeting.

**Agenda Item: BIP Benchmarks**

**BIP Benchmarks:** Kristi Plotner reported the second progress report has been submitted to CMS and is related to report the percentage of overall Long Term Care expenditures attributed to home and community based services has risen from the baseline 14.91% to 28.67% at the first progress report and now 30.06% at the second report. This is amazing progress! Mississippi will continue to receive the 5% enhanced FMAP through September 30, 2015 despite passing the 25% mark. The goal is now 50%. Percentages will be affected by institutional rates rising as they are no longer frozen in state statute.
Agenda Item: Reports from Learning Collaborative Team Leaders

1. **Trisha Hinson – Housing**: Trisha reported since spring 2012, community living resources in our state have increased by 136 new units at 18 sites. Seven MDMH certified Community Living providers have been added to the MDMH certification roster. These numbers are growing at a steady pace as existing providers expand their services and new providers become certified to provide Community Living services. There are 2 Regional Public Housing Authorities in the state that give preference to people transitioning to the community with the B2I program. They are MS Regional Housing Authority # 7 and the Tennessee Regional Housing Authority. They both serve 10 counties. (see attached handout)

2. **Nova York-Conflict Free Case Management**: CFCM report from the team is being reviewed by CMS. A time will be scheduled with CMS for technical assistance.

3. **Transportation**: Jan Larsen was not present.

4. **Assessment Instrument Design**: Ashley Lacoste was not present.

5. **Dr. Craig Escude-Community Medical Support Team**: Dr. Craig Escude reported on four key topics.
   1. Leadership interest is needed in development and encouraging home based medical services. Volunteers are welcome.
   2. Educating medical providers and consumers on medication compliance issues. Proposals were sent to Golden Triangle and North Central PDDS for a pilot project.
   3. Currently working on the development of a consultative clinic to address the needs of the target population. Working with CMS which has some reasonable questions. They are fine with 90% of it.
   4. Awaiting approval for CAY center collaboration between UMMC and MS Children’s Home Services for children behavioral health care partnership in MS. (see attached handout).

6. **Quality Assurance Data**: Kristi Plotner reported Juliette Reese surveyed 29 consumers of mental health services. Kristi reported the minutes from the quality assurance meeting would be on MAC 2.0 website and she would have team leader report at next stakeholder’s meeting.

7. **Kris Jones- Guardianship**: Group has not met.

8. **Lisa Burck- Available Services**: Team has not met since previous stakeholder meeting and there is no information to report.

Agenda Item: B2I Update

Jennifer Fulcher, Assistant Project Director for B2I presented information on the B2I program. She reported 115 individuals transitioned with B2I services. They transitioned into the following waivers: 36 Elderly and Disabled (E&D Waiver), 73 Intellectual Disabilities/Developmental Disabilities Waiver (ID/DD Waiver), 2 Traumatic Brain Injury/Spinal Cord Injury Waiver (TBI/SCI Waiver), and
4 Independent Living Waiver (IL Waiver). The majority (53) of the transition fell into the age range of 40-64, 43 from age 19-39, 13 age 65+, 5 from age 12-18, and 1 from 6-11. Out of the 115 Transitioned 27 have discharges total - 14 were discharged because they completed the programs 365 day limit, 3 returned to institutions, 1 due to death, 2 opted hospice services, and 7 moved into a residence that is not qualified under B2I.

B2I began additional provider training in August 2013 through Marc Gold and Associates. This training addresses the “what next” stage focusing on improving quality of life by engaging and getting individuals involved in their community where they want to be. B2I is also working towards putting together a housing subsidy with rebalancing funds in the regions where they have a preference with housing authorities (Tennessee Valley Regional Housing Authority and Region VII Housing Authority). There should be more to report in the coming months as they get this set up and rolled out.

Agenda Item: B2I Survey

Jennifer Fulcher introduced Bill Moak – B2I Director of Education and Outreach. Bill spoke about his new role and strategy to build the brand of B2I. The goal is to promote, and prepare an education plan to get the word out. Bill covered the website address that was on the agenda for everyone. The B2I survey is located at http://goo.gl/ZYKvQw. The survey should only take about 5 minutes and this will serve as feedback for B2I to test the program. Nita Durrell - Medicaid Program Coordinator is also working with Bill on this project.

Agenda Item: MAC Centers

Melinda Bertucci, Director of Division of Aging and Adult Services provided a brief presentation on the MAC Centers. She covered how the MAC Centers will provide direction and information for seniors and individuals with disabilities. The program will provide information and assistance, Long Term Care options, Health and Wellness, and Benefits Counseling. There will be trained experienced professionals including social workers, nurses, counselors, and EMT’s. There will be “No Wrong Door” for clients. The question was asked about how the program will sustain itself after BIP program goes away? Melinda and Kristi stated other avenues that are being researched. DHS plans to request for continuation of funding from the State. The subject was brought up about knowing the community that is being served by MAC Centers. Melinda stated that this will be a challenge. However, they are working hard to ensure they know the community they serve. Marissa Whitehouse, MAC Centers Program Administrator has been working directly with implementation of pilot program and franchising across the state and she has begun traveling to meet with other states.

Agenda Item: Use of Funds

Kristi reported there is approximately $20 million dollars in savings. A total of 10,000 people have been trained via Direct Course which equals millions of hours in training within a short period of time. No Wrong Door computer system is well on its way, which will include No Wrong Door, Conflict-Free Case Management, Core Standardized Assessment, Incident Reporting, and Electronic Visit Verification.

(FEI) was chosen as the vendor for the No Wrong Door computer system effective October 1, 2013.
BIP approved use of funds include the following:

- No Wrong Door/Single Entry Point
- Waiver Program Expansion
- ARC Contract – Training for direct care staff
- Conflict-Free Case Management
- Implementation of 1915 (i) for IDD individuals
- Data Collection
- MAC Centers
- Mental Health ID/DD Waiver Rates
- Mandt System Training
- Bridge to Recovery Pilot Project
- Person Centered Training for ID/DD Waiver Support Coordinators and Providers
- Autism Pilot

**Agenda Item: Date of Next Meeting**

Meeting is scheduled for Tuesday, November 12, 2013 at 2:00pm at MS Children’s Home Services.
MAC 2.0 Stakeholders report of the

Community Medical Supports Group  08-27-13

Team Chair: Craig L. Escudé , MD

Team Members: Amy Bishop, Ann Barnes, Cindi Thompson, David Elkin, John Damon, Joye Steen, Juliette Reese, Kate Holland, Lance Sigrest, Margaret Wilson, Mary Smith, Rudy Johnson, Shannon Spooner, Stanley Devine, Tracy Mullholland

The current status of the Community Medical Supports Group areas of interest are listed below.

1. Develop and encourage home based medical services –

   Leadership interest needed

2. Education of medical providers and consumers on medication compliance issues.

   Proposals sent to Golden Triangle and North Central PDDs for a pilot project. If they agree to proceed, the agreement will be submitted to DOM for approval.

3. Development of a consultative clinic to address the needs of the target populations.

   DMH and DOM Leadership met and are in agreement with proceeding. Proposal has been amended to reflect that BIP funds cannot be used to build a building or purchase land. Awaiting final approval from CMS.

4. Development of the CAY center collaboration between UMMC and MS Children’s Home Services for a children’s behavioral heath care partnership in MS.

   Awaiting approval from CMS.

Respectfully submitted,

Craig L. Escudé, MD
MAC 2.0 Housing Team  
Status Report – August 27, 2013

Update:

Since the last MAC 2.0 meeting, Mississippi, along with 6 other states, was selected by SAMHSA to participate in the 2013 Olmstead Policy Academy initiative. Several members of the BIP Housing Team are also on the Mississippi Olmstead Policy Academy Team and are already engaged in helping develop Olmstead-specific strategies in the areas of housing, employment, and peer support. Much of the work that the MAC 2.0 Housing Team has done and the information that has been developed will help strengthen the strategies that will be developed by the Olmstead Policy Academy here in our state.

Specific to development of expanded housing resources in Mississippi for individuals transitioning to the community through B2I and other avenues, we’d like to share the following estimates: Since spring of 2012, approximately 136 new units at 18 sites by 7 MDMH certified Community Living providers have been added to the MDMH certification roster. These numbers are continuing to grow at a steady pace as existing providers expand their services and new providers become certified to provide Community Living services.

Also of significance, there are 2 Regional Public Housing Authorities in the state that have granted preferences to people transitioning to the community under B2I. It is hoped that others will begin to offer preferences as well.

Recommendations (as provided at the May meeting):

1. The MAC 2.0 Housing Team recommends the development of a long-term Community Housing Committee to continuously monitor policies and agencies to ensure access to housing in local communities and accommodations for individuals with disabilities. There is a need for oversight of policies that housing and other agencies are implementing that may present unwarranted barriers to community housing access. This committee can also help research, describe and define current and future housing needs in order to ensure (1) full, appropriate use of existing housing funding mechanisms and (2) identification and access to additional/expanded housing funding options based on those identified needs. Accountability for current and future housing funding needs to be included.

2. The Housing Team also acknowledges the need for some kind of statewide clearinghouse that may not necessarily be a referral entity but would be a central, consolidated directory of housing and community living options for individuals with a disability that exist in Mississippi. This directory could also include an education and training component on existing or desired community living models for entities and/or
individuals who might be interested in developing additional housing resources. The Team suggests that previous or existing efforts may just need to be updated, consolidated and made available electronically. The Housing Team is continuing to research this.

3. The Housing Team will continue to monitor the possibility for Mississippi to reapply for Section 811 project-based voucher funding. A workgroup made up of representatives from Mississippi Home Corps, MS Division of Medicaid, and MS Department of Mental Health continues to meet to ensure readiness for a 2013... application opportunity by accessing any technical assistance that is available to help strengthen Mississippi’s application. The Section 811 project-based vouchers would be another component of Mississippi’s community living service array and would expand existing housing options.

Trisha Hinson, MAC 2.0 Housing Team Leader